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PATENTATTORNEY DOCKET
NO. 2003P08216 US**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Caspi, et al.

Serial No.: 10/672,337

Filed: September 26, 2003

Title: SYSTEM AND METHOD FOR
IN-BUILDING PRESENCE
SYSTEM

Group Art Unit: 2681

Examiner: Cai

MAIL STOP RCE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

) CERTIFICATE OF FACSIMILE TRANSMISSION

) The undersigned hereby certifies that this
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) Facsimile Number: 571-273-8300

) No. of Pages: Two (2) Total

) Date Transmitted: April 27, 2006

) By: 
Jeannette L. Taplin**REQUEST FOR CONTINUED EXAMINATION (RCE)**
UNDER 37 C.F.R. §1.114

Sir:

Applicant hereby requests continued examination, in accordance with 37 C.F.R. §1.114,
for the above identified application.

TIME REQUEST IS BEING MADE

1. This request is being submitted:
- i. ☒ Prior to abandonment of the application
 - ii. ☐ With payment of the issue fee
 - ☐ Prior to payment of issue fee
 - ☐ Issue fee has been paid but a petition under §1.313 has been granted
 - iii. ☐ Prior to a decision on appeal to the Board of Patent Appeals & Interferences
 - ☐ A notice is being separately sent to the Board of Patent Appeals & Interferences that this Request for Continued Examination is being filed.

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Serial No.: 10/672,337

Attorney Docket No.: 2003P08216US

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2. Enclosed herewith is/are:

- ☐ A Petition for Extension of Time for ____ month(s).
☒ Please enter the Amendment submitted: April 3, 2006.
☐ Please enter the enclosed Preliminary Amendment
☐ An Information Disclosure Statement (37 C.F.R. §1.98) with PTO-1449 and
 ____ references.
☐ New arguments
☐ New evidence in support of patentability
☐ Other:

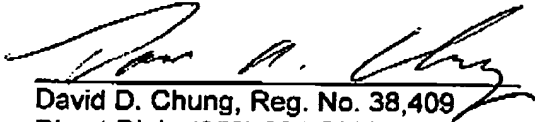
FEE FOR REQUEST (37 C.F.R. §1.17(e))3. ☒ Filing fee has been calculated as shown below after entering the previous amendment (other than small entity):

For	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	x Rate	Additional Fees
Total Claims	18	-20	=0	X \$ 50	\$ 0.00
Indep. Claim	3	-3	=0	X \$200	\$ 0.00
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim				x \$300	\$ 0.00
Basic filing Fee					\$ 790.00
Total					\$ 790.00

4. ☒ Please charge Deposit Account No. 19-2179 in the amount of \$ 790.00. The Commissioner is hereby authorized to charge any fees that may be required, or credit any overpayment to Deposit Account No. 19-2179 pursuant to 37 C.F.R. §1.25.

PLEASE MAIL CORRESPONDENCE TO: Respectfully submitted,

Siemens Corporation
 Customer Number: 28524
 Attn: Elsa Keller, Legal Administrator
 Intellectual Property Department
 170 Wood Avenue South
 Iselin, NJ 08830


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